

97TH GENERAL ASSEMBLY State of Illinois 2011 and 2012 HB4716

Introduced 2/3/2012, by Rep. Robyn Gabel

SYNOPSIS AS INTRODUCED:

325 ILCS 20/3 from Ch. 23, par. 4153 325 ILCS 20/11 from Ch. 23, par. 4161

Amends the Early Intervention Services System Act. Changes the definition of the term "eligible infants and toddlers" to mean infants and toddlers under 60 (rather than 36) months of age with any of the specified conditions. Provides that an eligible infant or toddler's individualized family service plan shall serve as the child's individualized educational plan (IEP) until an IEP is developed and implementation of IEP services is commenced, if an IEP is not developed and implemented for the child by the child's 3rd birthday. Provides that the individualized family service plan may be modified by agreement between the local educational agency and the parents. Effective immediately.

LRB097 18157 KTG 63381 b

FISCAL NOTE ACT MAY APPLY

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1 AN ACT concerning children.

Be it enacted by the People of the State of Illinois, represented in the General Assembly:

- Section 5. The Early Intervention Services System Act is amended by changing Sections 3 and 11 as follows:
- 6 (325 ILCS 20/3) (from Ch. 23, par. 4153)
- 7 Sec. 3. Definitions. As used in this Act:
- 8 (a) "Eligible infants and toddlers" means infants and
 9 toddlers under 60 36 months of age with any of the following
 10 conditions:
- 11 (1) Developmental delays.
- 12 (2) A physical or mental condition which typically
 13 results in developmental delay.
 - (3) Being at risk of having substantial developmental delays based on informed clinical judgment.
 - (4) Either (A) having entered the program under any of the circumstances listed in paragraphs (1) through (3) of this subsection but no longer meeting the current eligibility criteria under those paragraphs, and continuing to have any measurable delay, or (B) not having attained a level of development in each area, including (i) cognitive, (ii) physical (including vision and hearing), (iii) language, speech, and communication, (iv)

psycho-social, or (v) self-help skills, that is at least at the mean of the child's age equivalent peers; and, in addition to either item (A) or item (B), (C) having been determined by the multidisciplinary individualized family service plan team to require the continuation of early intervention services in order to support continuing developmental progress, pursuant to the child's needs and provided in an appropriate developmental manner. The type, frequency, and intensity of services shall differ from the initial individualized family services plan because of the child's developmental progress, and may consist of only service coordination, evaluation, and assessments.

- (b) "Developmental delay" means a delay in one or more of the following areas of childhood development as measured by appropriate diagnostic instruments and standard procedures: cognitive; physical, including vision and hearing; language, speech and communication; psycho-social; or self-help skills. The term means a delay of 30% or more below the mean in function in one or more of those areas.
- (c) "Physical or mental condition which typically results in developmental delay" means:
 - (1) a diagnosed medical disorder bearing a relatively well known expectancy for developmental outcomes within varying ranges of developmental disabilities; or
 - (2) a history of prenatal, perinatal, neonatal or early developmental events suggestive of biological insults to

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- the developing central nervous system and which either singly or collectively increase the probability of developing a disability or delay based on a medical history.

 (d) "Informed clinical judgment" means both clinical
 - (d) "Informed clinical judgment" means both clinical observations and parental participation to determine eligibility by a consensus of a multidisciplinary team of 2 or more members based on their professional experience and expertise.
 - (e) "Early intervention services" means services which:
 - (1) are designed to meet the developmental needs of each child eligible under this Act and the needs of his or her family;
 - (2) are selected in collaboration with the child's family;
 - (3) are provided under public supervision;
 - (4) are provided at no cost except where a schedule of sliding scale fees or other system of payments by families has been adopted in accordance with State and federal law;
 - (5) are designed to meet an infant's or toddler's developmental needs in any of the following areas:
- (A) physical development, including vision and hearing,
- 24 (B) cognitive development,
 - (C) communication development,
- 26 (D) social or emotional development, or

Т	(E) adaptive development;
2	(6) meet the standards of the State, including the
3	requirements of this Act;
4	(7) include one or more of the following:
5	(A) family training,
6	(B) social work services, including counseling,
7	and home visits,
8	(C) special instruction,
9	(D) speech, language pathology and audiology,
10	(E) occupational therapy,
11	(F) physical therapy,
12	(G) psychological services,
13	(H) service coordination services,
14	(I) medical services only for diagnostic or
15	evaluation purposes,
16	(J) early identification, screening, and
17	assessment services,
18	(K) health services specified by the lead agency as
19	necessary to enable the infant or toddler to benefit
20	from the other early intervention services,
21	(L) vision services,
22	(M) transportation, and
23	(N) assistive technology devices and services;
24	(8) are provided by qualified personnel, including but
25	not limited to:
26	(A) child development specialists or special

1	educators,
2	(B) speech and language pathologists and
3	audiologists,
4	(C) occupational therapists,
5	(D) physical therapists,
6	(E) social workers,
7	(F) nurses,
8	(G) nutritionists,
9	(H) optometrists,
10	(I) psychologists, and
11	(J) physicians;
12	(9) are provided in conformity with an Individualized
13	Family Service Plan;
14	(10) are provided throughout the year; and
15	(11) are provided in natural environments, including
16	the home and community settings in which infants and
17	toddlers without disabilities would participate to the
18	extent determined by the multidisciplinary Individualized
19	Family Service Plan.
20	(f) "Individualized Family Service Plan" or "Plan" means a
21	written plan for providing early intervention services to a
22	child eligible under this Act and the child's family, as set
23	forth in Section 11.
24	(g) "Local interagency agreement" means an agreement
25	entered into by local community and State and regional agencies
26	receiving early intervention funds directly from the State and

- 1 made in accordance with State interagency agreements providing
- 2 for the delivery of early intervention services within a local
- 3 community area.
- 4 (h) "Council" means the Illinois Interagency Council on
- 5 Early Intervention established under Section 4.
- 6 (i) "Lead agency" means the State agency responsible for
- 7 administering this Act and receiving and disbursing public
- 8 funds received in accordance with State and federal law and
- 9 rules.
- 10 (i-5) "Central billing office" means the central billing
- office created by the lead agency under Section 13.
- 12 (j) "Child find" means a service which identifies eligible
- infants and toddlers.
- 14 (k) "Regional intake entity" means the lead agency's
- designated entity responsible for implementation of the Early
- 16 Intervention Services System within its designated geographic
- 17 area.
- 18 (1) "Early intervention provider" means an individual who
- is qualified, as defined by the lead agency, to provide one or
- 20 more types of early intervention services, and who has enrolled
- as a provider in the early intervention program.
- 22 (m) "Fully credentialed early intervention provider" means
- 23 an individual who has met the standards in the State applicable
- 24 to the relevant profession, and has met such other
- 25 qualifications as the lead agency has determined are suitable
- for personnel providing early intervention services, including

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- 1 pediatric experience, education, and continuing education. The
- 2 lead agency shall establish these qualifications by rule filed
- 3 no later than 180 days after the effective date of this
- 4 amendatory Act of the 92nd General Assembly.
- 5 (Source: P.A. 92-307, 8-9-01; 93-124, eff. 7-10-03.)
- 6 (325 ILCS 20/11) (from Ch. 23, par. 4161)
- 7 Sec. 11. Individualized Family Service Plans.
- 8 (a) Each eligible infant or toddler and that infant's or toddler's family shall receive:
 - (1) timely, comprehensive, multidisciplinary assessment of the unique needs of each eligible infant and toddler, and assessment of the concerns and priorities of the families to appropriately assist them in meeting their needs and identify services to meet those needs; and
 - (2) a written Individualized Family Service Plan developed by a multidisciplinary team which includes the parent or guardian. The individualized family service plan shall be based on the multidisciplinary team's assessment of the resources, priorities, and concerns of the family and its identification of the supports and services necessary to enhance the family's capacity to meet the developmental needs of the infant or toddler, and shall include the identification of services appropriate to meet those needs, including the frequency, intensity, and method of delivering services. During and as part of the

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initial development of the individualized family services plan, and any periodic reviews of the plan, the multidisciplinary team shall consult the lead agency's therapy guidelines and its designated experts, if any, to help determine appropriate services and the frequency and services. All intensity of those services individualized family services plan must be justified by the multidisciplinary assessment of the unique strengths and needs of the infant or toddler and must be appropriate to meet those needs. At the periodic reviews, the team shall determine whether modification or revision of the outcomes or services is necessary.

- (b) The Individualized Family Service Plan shall be evaluated once a year and the family shall be provided a review of the Plan at 6 month intervals or more often where appropriate based on infant or toddler and family needs. The lead agency shall create a quality review process regarding Individualized Family Service Plan development and changes thereto, to monitor and help assure that resources are being used to provide appropriate early intervention services.
- (c) The evaluation and initial assessment and initial Plan meeting must be held within 45 days after the initial contact with the early intervention services system. With parental consent, early intervention services may commence before the completion of the comprehensive assessment and development of the Plan.

- (d) Parents must be informed that, at their discretion, early intervention services shall be provided to each eligible infant and toddler in the natural environment, which may include the home or other community settings. Parents shall make the final decision to accept or decline early intervention services. A decision to decline such services shall not be a basis for administrative determination of parental fitness, or other findings or sanctions against the parents. Parameters of the Plan shall be set forth in rules.
- (e) The regional intake offices shall explain to each family, orally and in writing, all of the following:
 - (1) That the early intervention program will pay for all early intervention services set forth in the individualized family service plan that are not covered or paid under the family's public or private insurance plan or policy and not eligible for payment through any other third party payor.
 - (2) That services will not be delayed due to any rules or restrictions under the family's insurance plan or policy.
 - (3) That the family may request, with appropriate documentation supporting the request, a determination of an exemption from private insurance use under Section 13.25.
 - (4) That responsibility for co-payments or co-insurance under a family's private insurance plan or

policy will be transferred to the lead agency's central billing office.

- (5) That families will be responsible for payments of family fees, which will be based on a sliding scale according to income, and that these fees are payable to the central billing office, and that if the family encounters a catastrophic circumstance, as defined under subsection (f) of Section 13 of this Act, making it unable to pay the fees, the lead agency may, upon proof of inability to pay, waive the fees.
- (f) The individualized family service plan must state whether the family has private insurance coverage and, if the family has such coverage, must have attached to it a copy of the family's insurance identification card or otherwise include all of the following information:
 - (1) The name, address, and telephone number of the insurance carrier.
 - (2) The contract number and policy number of the insurance plan.
 - (3) The name, address, and social security number of the primary insured.
 - (4) The beginning date of the insurance benefit year.
- (g) A copy of the individualized family service plan must be provided to each enrolled provider who is providing early intervention services to the child who is the subject of that plan.

- 1 (h) If an individualized educational plan (IEP) is not
- developed and implemented for the child by the child's 3rd
- 3 birthday, the individualized family service plan shall serve as
- 4 the child's IEP until an IEP is developed and implementation of
- 5 IEP services is commenced. The individualized family service
- 6 plan may be modified by agreement between the local educational
- 7 agency and the parents.
- 8 (Source: P.A. 91-538, eff. 8-13-99; 92-10, eff. 6-11-01;
- 9 92-307, eff. 8-9-01; 92-651, eff. 7-11-02.)
- 10 Section 99. Effective date. This Act takes effect upon
- 11 becoming law.